| Fill in this information to identify your case: | | |
|-------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District of ILLINOIS (State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: | Identify Yourself | | |
|---------------|---------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------------------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your | full name | | |
| govern | te the name that is on your vernment-issued picture ntification (for example, ur driver's license or esport). | Kelli First name | First name |
| your di | | Lynn Middle name | Middle name |
| identifi | our picture cation to your meeting e trustee. | Roccaforte Last name | Last name |
| | - u u o o o o | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All ot | her names you | Kelli | |
| have years | used in the last 8 | First name Lynn | First name |
| | e your married or | Middle name Rowe | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| your | the last 4 digits of Social Security | xxx - xx - <u>5051</u> | XXX - XX |
| Individ | er or federal lual Taxpayer | OR | OR |
| identif | ication number | 9 xx - xx | 9 xx - xx |

Debtor 1 Kelli Lynn Document Roccaforte Page 2 of 57

Case Number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | I have not used any business names or EINs. | I have not used any business names or EINs. Business name |
| | Include trade names and doing business as names | Business name | Business name |
| | | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | A214 Seventh Street Number Street | Number Street |
| | | Rockford IL 61109 City State ZIP Code | City State ZIP Code |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | have another reason. Explain. (See 28 U.S.C. § 1408 | I have another reason. Explain. (See 28 U.S.C. § 1408 |
| | | | |
| | | | |
| | | | |

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Kelli Debtor 1

Lynn

Document Roccaforte

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Case Number (if known)

| Pa | Tell the Court About You | r Bankruptcy | Case | | | | |
|-----|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------|-----------------------------------------------------------------------------|----------------------------------------|
| 7. | The chapter of the Bankruptcy Code you | | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | |
| | are choosing to file | ☐ Chapter 7 | | | | | |
| | under | ☐ Chap | ter 11 | | | | |
| | | ☐ Chap | ter 12 | | | | |
| | | ■ Chap | ter 13 | | | | |
| 8. | How you will pay the fee | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | ng the fee rney is card or check |
| | | | | | - | oose this option, sign and attac e <i>in Installments</i> (Official Form | |
| | | By la less t pay t | quest that my fee be waived (You may request this option only if you are filing for Chapter 7. aw, a judge may, but is not required to, waive your fee, and may do so only if your income is than 150% of the official poverty line that applies to your family size and you are unable to the fee in installments). If you choose this option, you must fill out the <i>Application to Have the</i> | | | | |
| | | Спар | mer / Filling Fee | e walved (Official | i Foiiii 103 | BB) and file it with your petition. | |
| 9. | Have you filed for bankruptcy within the last 8 years? | □ No | s: II ND | | 140 | 11/28/2012 Case Number | 12-84426 |
| | iast o years: | Yes. | District | | vvnen | MM / DD / YYYY | |
| | | | District None | | When | Case Number | |
| | | | | | | MM / DD / YYYY | |
| | | | District | | When | Case Number | |
| | | | | | | MM / DD / YYYY | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is | ☐ Yes. | Debtor | | | Relationship to you _ | |
| | not filing this case with you, or by a business parter, or by affiliate? | | District | | When | Case Number, if kr MM / DD / YYYY | iown |
| | annate: | | Debtor | | | Relationship to you _ | |
| | | | District | | When | Case Number, if kr | nown |
| | | | | | | | |
| 11. | Do you rent your residence? | □ No. ■ Yes. | Go to line 12 Has your landlo residence? | ord obtained an evid | ction judgme | ent against you and do you want to | stay in your |
| | | | | | t About an E | Eviction Judgment Against You (Fo | rm 101A) and file it with |

Debtor 1 Kelli Lynn Page 4 of 57
Roccaforte Case Number (if known)

| 12. | | _ | | | |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------|----------------------------------------|----------------|
| of any full- or part-time business? | | ■ No. □ Yes. | Go to Part 4. Name and location of be | usiness | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as | | Name of business, if any | | |
| | a corporation, partnerhsip, or LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. | | Number Street | | |
| | | | City | | State Zip Code |
| | | | Check the appropriate b | box to describe your business: | |
| | | | ☐ Health Care Busir | ness (as defined in 11 U.S.C. § 101(27 | A)) |
| | | | ☐ Single Asset Real | Estate (as defined in 11 U.S.C. § 101 | (51B)) |
| | | | ☐ Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | |
| | | | ☐ Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | |
| | | | ☐ None of the above | e | |
| | For a definition of small business debtor, see 11 U.S.C. § 101(51D). | _ | the Bankruptcy Code. | 11, but I am NOT a small business deb | - |
| Pa | Report if You Own or Ha | | | erty That Needs Immediate Attention | |
| | | ve Any Hazard | ous Property or Any Prope | | |
| 14. | Do you own or have any property that poses or is | No. | What is the hazard? | | |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? | No. | | | |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock | No. | What is the hazard? _ | needed, why is it needed? | |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own | No. | What is the hazard? _ | | |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | No. | What is the hazard? _ | | |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | No. | What is the hazard? | needed, why is it needed? | |
| 14. | property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | No. | What is the hazard? | needed, why is it needed? | |

Kelli Lynn Document Roccaforte

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Debtor 1

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing a | about |
|-------------------------------------------|-------|
| credit counseling because of: | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to rece | ive a briefing about |
|---------------------------|----------------------|
| credit counseling because | se of: |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Kelli Lynn Roccaforte

Debtor 1

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| | riist Name | middle Name Last Name | | | | | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--|--|--|
| Pai | t 6: Answer These Questions | for Reporting Purposes | | | | | |
| 16. | What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. | | | | | |
| | | 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | |
| | | Yes. Go to line 17. 16c. State the type of debts you | owe that are not consumer debts or bu | siness debts. | | | |
| 17. | Are you filing under Chapter 7? | No. I am not filing under C | | | | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | _ | oter 7. Do you estimate that after any e | | | | |
| 18. | How many creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | | | |
| 19. | How much do you estimate your assets to be worth? | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| 20. | How much do you estimate your liabilities to be? | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| Pa | Sign Below | | | | | | |
| For | you | correct. If I have chosen to file under Chap | d I declare under penalty of perjury that upter 7, I am aware that I may proceed, understand the relief available under ea | f eligible, under Chapter 7, 11,12, or 13 | | | |
| | | If no attorney represents me and | I did not pay or agree to pay someone nd read the notice required by 11 U.S.C | who is not an attorney to help me fill out . § 342(b). | | | |
| | | I understand making a false state | t in fines up to \$250,000, or imprisonme | money or property by fraud in connection | | | |
| | | /s/ Kelli Lynn Roccafe Signature of Debtor 1 | orte 🗶 | Signature of Debtor 2 | | | |
| | | Executed on02/20/201 | 7 | Executed on | | | |

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| Debtor 1 | Kelli | Lynn | Roccaforte | Case Number (if known) |
|----------|------------|-------------|------------|------------------------|
| | First Name | Middle Name | Last Name | |

🗶 /s/ Daniel Fasman Date: 02/20/2017 Date Signature of Attorney for Debtor MM / DD / YYYY **Daniel Fasman** Printed name Geraci Law L.L.C. Firm name 55 E. Monroe St., #3400 Number Street ΙL 60603 Chicago City State ZIP Code 312-332-1800 ndil@geracilaw.com Contact Phone _ Email address 6307786 IL Bar number State

| Fill in this information to identify your case: | | | | |
|-------------------------------------------------|---------------------|-------------------------------------|------------------|--|
| Debtor 1 | Kelli | Lynn | Roccaforte | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of | ILLINOIS (State) | |
| Case Number (If known) | r | | <u></u> | |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Summarize Your Assets | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| | Your assets Value of what you own |
| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ 1,927 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ 1,927 |
| | |
| Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$3,400 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | <u>\$7,715</u> |
| | |
| Part 3: Summarize Your Liabilities | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,597.18 |
| 5. Schedule J: Your Expenses (Official Form 106J) | \$1,347.00 |
| Copy your monthly expenses from line 22c of Schedule J | <u> </u> |

Document Roccaforte Kelli Lynn Case Number (if known) __ Debtor 1 First Name Middle Name Last Name

| Part 4: Ai | swer These Questions for Administrative and Statistical Records | | | | |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--|--|--|
| _ | Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes | | | | |
| Your de family, o | What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | |
| | 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$2,458.56 | | | | |
| 9. Copy the fo | lowing special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> : | Total claim | | | |
| From Part | 4 of Schedule E/F, copy the following: | | | | |
| 9a. Domesti | c support obligations (Copy line 6a.) | \$_0.00 | | | |
| 9b. Taxes a | nd certain other debts you owe the government. (Copy line 6b.) | \$_0.00 | | | |
| 9c. Claims f | or death or personal injury while you were intoxicated. (Copy line 6c.) | \$_0.00 | | | |
| 9d. Student | ioans. (Copy line 6f.) | \$_0.00 | | | |
| | ns arising out of a separation agreement or divorce that you did not report as s. (Copy line 6g.) | \$_0.00 | | | |
| 9f. Debts to | pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | \$_0.00 | | | |
| 9g. Total. A | dd lines 9a through 9f. | \$ 0.00 | | | |

| | Caso 1 ⁻ | 7 90226 Doc 1 | Filad 02/21/17 | Entered 02/21/17 11 | :25:32 Des | sc Main |
|----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------------------------------------|--------------------------------------------------|----------------------------------------------------------------------------------|
| Fill in this in | formation to ide | ntify your case and this fil | | 0 of 57 | 20.02 | , o |
| Debtor 1 | Kelli | Lynn | Roccaforte | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court fo | or the : <u>NORTHERN</u> Distri | ict of <u>ILLINOIS</u> | | | |
| Case Number | | | (State) | | | Check if this is an |
| (If known) | | | | | | amended filing |
| Official F | <u>orm 106A</u> | <u>/B</u> | | | | |
| Schedul | e A/B: Pr | operty | | | | 12/15 |
| esponsible for ages, write you part 1: 01. Do you ow No. Yes. | supplying corre ur name and cas Describe Each Re un or have any le Describe | ct information. If more spa e number (if known). Ansv sidence, Building, Land, or C gal or equitable interest in | ace is needed, attach a separate | or similar property? | | |
| | - | - | | | > | \$0.00 |
| Part 2: | Describe Your Vel | nicles | | | | |
| you own that so O3. Cars, vans No. Yes. N A O4. Watercraft Examples: No. Yes. | Describe Describe Describe Make: Model: Year: Approximate Milea Other information: t, aircraft, motor Boats, trailers, motor Describe | Buick LeSabre 2000 170,000 homes, ATVs and other repors, personal watercraft, fishing | lso report it on Schedule G: Exe | and another nity property (see cles, and accessories ccessories | Do not deduct secured of the amount of any secur | • |
| | | | | | | \$ 1,425.00 |
| Part 3: | Describe Your Per | sonal and Household Items | | | | |
| | r have any legal | or equitable interest in any | y of the following items? | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| Examples: | | iishings urniture, linens, china, kitchenw | vare | | | |
| Yes. | Describe | Furniture, linens, small applia | nces, table & chairs, bedroom set | | \$100 | \$ <u> </u> |

Kelli

Case 17-80336

Doc 1

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Desc Main

First Name Middle Name Filed 02/21/17

Roccatorte
Document
Last Name

| 16. | Examples: No. Yes. | Money you have in | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition | | \$ <u> </u> |
|-----|----------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------------------------------|
| | | have any legal | or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| | | Write that numb | er here> | | |
| | | | of your entries from Part 3, including any entries for pages you have attached | | \$500.00 |
| | Yes. | Describe | books, CDs, DVDs & Family Photos | \$100 | \$ 100.00 |
| 14. | Any other | personal and ho | ousehold items you did not already list, including any health aids you did not list | | \$ <u>0.0</u> 0 |
| | Yes. | Describe | 1 dog | \$0 | |
| 13. | Non-farm a Examples: | unimals Dogs, cats, birds, I | norses | | <u> </u> |
| | No. Yes. | Describe | Costume jewelry, earrings, watch | \$100 | \$ 100.00 |
| 12. | gold, silver | Everyday jewelry, (| costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | | <u>* 100.0</u> 0 |
| | Yes. | Describe | Everyday clothes, shoes, accessories | \$100 | \$ 100.00 |
| 11. | Clothes Examples: | Everyday clothes, | furs, leather coats, designer wear, shoes, accessories | | |
| | No. Yes. | Describe | | | \$0.00 |
| 10. | | Pistols, rifles, shot | guns, ammunition, and related equipment | | ş <u> 0.0</u> 0 |
| | No. Yes. | Describe | | | \$ 0.00 |
| 09. | Examples: | | hobbies nic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes nusical instruments | | |
| | No. Yes. | Describe | | | \$0.00 |
| 08. | stamp, coin | Antiques and figuri | ines; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles | | • |
| | Yes. | Describe | Flat screen TV, computer, printer, music collection, cell phone | \$100 | \$ 100.00 |
| 07. | | Televisions and ra | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games | | |

Kelli

Case 17-80336

Doc 1

Filed 02/21/17

Roccatorte
Document
Last Name

Entered 02/21/17 11:25:32 Page 12 of 57 Pumber (if known)

Desc Main

First Name

Middle Name

| 17. | Deposits o | r money | | | |
|-----|------------------|----------------------|-------------------------------------------|---------------------------------------------------------------------|-------------------|
| | Examples: | Checking, savings | s, or other financial accounts; certifica | tes of deposit; shares in credit unions, brokerage houses, | |
| | and other s | imilar institutions. | If you have multiple accounts with the | e same institution, list each. | |
| | No. | | | | |
| | = ., | | A second Towns | Lea Ph. Carra and an | |
| | Yes. | Describe | Account Type: | Institution name: | |
| | | | Other financial account | Greendot pre-paid debit account | \$ <u>2.00</u> |
| | | | | | |
| 40 | Danda mi | sual funda au | aublich traded atacks | | Ψ |
| 10. | | - | publicly traded stocks | | |
| | Examples: | Bond funds, inves | stment accounts with brokerage firms, | money market accounts | |
| | No. | | | | |
| | Yes. | Describe | Institution or issuer name: | | |
| | 1 es. | Describe | mentation of locaer flame. | | • 0.00 |
| | | | | | \$ <u>0.0</u> 0 |
| 19. | Non-public | ly traded stock | c and interests in incorporated a | and unincorporated businesses, including an interest in | |
| | No. | | | | |
| | □ _{Vaa} | December | Name of Entity and Percent of | Ownership: | |
| | Yes. | Describe | Name of Littity and I election | Ownership. | |
| | | | | | \$ <u> </u> |
| 20. | Governme | nt and corpora | te bonds and other negotiable a | and non-negotiable instruments | |
| | Negotiable | instruments inclu | de personal checks, cashiers' checks, | promissory notes, and money orders. | |
| | Non-negotia | able instruments | are those you cannot transfer to some | one by signing or delivering them. | |
| | No. | | • | | |
| | = | | | | |
| | Yes. | Describe | Issuer name: | | |
| | | | | | \$0.00 |
| 21. | Retirement | or pension ac | counts | | |
| | | - | | avings accounts, or other pension or profit-sharing plans | |
| | | | | Things associate, or outer portion of profit origining plants | |
| | No. | | | | |
| | Yes. | Describe | Type of account and Institution | name: | |
| | | | Pension plan | IMRF | \$ Unknown |
| | | | | | |
| | | | | | \$ <u>0.0</u> 0 |
| 22. | Security de | eposits and pre | epayments | | |
| | Your share | of all unused dep | osits you have made so that you may | continue service or use from a company | |
| | Examples: | Agreements with | landlords, prepaid rent, public utilities | (electric, gas, water), telecommunications | |
| | No. | - | | | |
| | = : | | | | |
| | Yes. | Describe | Institution name or individual: | | |
| | | | Security deposit on rental unit | Landlord | \$ 625.00 |
| | | | | | |
| | | | | | \$ |
| 23. | Annuities (| A contract for | a periodic payment of money to | you, either for life or for a number of years) | |
| | No. | | | | |
| | Yes. | Describe | Issuer name and description: | | |
| | Ш 100. | DC3011DC | | | \$ 0.00 |
| | | | | | \$0.00 |
| 24. | Interests in | n an education | IRA, in an account in a qualified | d ABLE program, or under a qualified state tuition program. | |
| | 26 U.S.C. § | § 530(b)(1), 529A | A(b), and 529(b)(1). | | |
| | No. | | | | |
| | = | | lastitution none and decoration | Compared to the assessed of any interests 44 H C C S E04/s). | |
| | Yes. | Describe | institution name and description | n. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| | | | | | \$0.00 |
| 25. | Trusts, equ | uitable or futur | e interests in property (other the | an anything listed in line 1), and rights or powers | |
| | No. | | | | |
| | = | | | | |
| | Yes. | Describe | | | |
| | | | | | \$0.00 |
| 26. | Patents, co | pyrights, trade | emarks, trade secrets, and other | r intellectual property | |
| | | | ames, websites, proceeds from royalt | | |
| | | internet demain n | unico, websites, procede nom royali | and the hours agreements | |
| | No. | | | | |
| | Yes. | Describe | | | |
| | _ | | | | \$ 0.00 |
| 27 | Licerca 4 | ronobicas s | Lothor gonoral intermibles | | |
| ۷1. | | | l other general intangibles | | |
| | Examples: | Building permits, | exclusive licenses, cooperative assoc | iation holdings, liquor licenses, professional licenses | |
| | No. | | | | |
| | Yes. | Describe | | | |
| | L 163. | 20001100 | | | |
| | | | | | \$ <u>0.0</u> 0 |
| | | | | | |

Kelli

Case 17-80336 Doc 1

Filed 02/21/17

Entered 02/21/17 11:25:32 Page 13 of 57 umber (if known)

Desc Main

First Name Middle Name

| | : u c | 1212 | . Т/ Т | - 1 |
|----|------------------|------|--------|-----|
| _R | occaf | 0rte | - 1 | |
| | | ıme | | |
| | st Name | | | |

| Mor | ney or property owed to yo | u? | Current value of the portion you own? Do not deduct secured claims or exemptions |
|-----|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| 28. | Tax refunds owed to you | | |
| | No. | | 1 |
| | Yes. Describe | | \$ 0.00 |
| 29. | Family support Examples: Past due or lump s No. | sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement | • |
| | Yes. Describe | | |
| 30. | | bwes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, id loans you made to someone else | \$0.00 |
| | | | \$0.00 |
| 31. | Interest in insurance polici Examples: Health, disability, control No. Yes. Describe | ies or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company Name & Beneficiary: Health insurance | |
| | | Term life insurance \$0 | |
| 32. | | lat is due you from someone who has died living trust, expect proceeds from a life insurance policy, or are currently entitled to receive as died. | \$0.00 |
| | Yes. Describe | | |
| 33. | - | Debtor has a potential claim against an unknown mesh manufacturer, debtor may also be a member of a class action against mesh manufacturers | \$0.00 |
| 34 | Other contingent and unli | quidated claims of every nature, including counterclaims of the debtor and rights | \$0.00 |
| ••• | No. | quadica statino of every flucture, metaling escanteredante of the abster and righte | |
| | Yes. Describe | | |
| 35. | Any financial assets you o | lid not already list | \$0.00 |
| | No. | · | |
| | Yes. Describe | | \$ 0.00 |
| | | | ş <u> </u> |
| | | of your entries from Part 4, including any entries for pages you have attached er here | \$627.00 |
| | Describe Any Rus | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1. | |
| | art or | egal or equitable interest in any business-related property? | |
| | No. Yes. | | |
| | _ | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | | mmissions you already earned | |
| | No. Yes. Describe | | |
| | | | \$0.00 |

Kelli

Case 17-80336 Doc 1

Filed 02/21/17 Entered 02/21/17 11:25:32

Document Page 14 of 57 Pumber (if known)

Desc Main

First Name

Middle Name

| 39. | Office equi | ipment, furnishiı | ngs, and supplies | |
|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| | Examples: | Business-related co | omputers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | |
| | No. | | | |
| | Yes. | Describe | | |
| | | Describe | | \$ 0.00 |
| 40. | Machinery | fixtures, equipr | nent, supplies you use in business, and tools of your trade | - |
| | No. | , | non, cappino you acciminately and toole of your mane | |
| | = | | | |
| | Yes. | Describe | | |
| | | | | \$0 <u>.0</u> 0 |
| 41. | Inventory | | | |
| | No. | | | |
| | Yes. | Describe | | |
| | | | | \$ 0.00 |
| 42. | Interests in | n partnerships o | r joint ventures | |
| | No. | - | Name of Entity and Percent of Ownership: | |
| | = | | Name of Entity and Percent of Ownership. | |
| | Yes. | Describe | | |
| 40 | 0 | | | \$0.00 |
| 43. | | lists, mailing list | s, or other compilations | |
| | No. | | | |
| | Yes. | Describe | | |
| | | | | \$0.00 |
| 44. | Any busine | ess-related prop | erty you did not already list | |
| | No. | | | |
| | Yes. | Describe | | |
| | 1 63. | Describe | | \$ 0.00 |
| | | | | \$0.00 |
| | A -l -l 4ll - | | form and the form Deat Fine bullion and and the form and the body | |
| | | | of your entries from Part 5, including any entries for pages you have attached | ** 0.00 |
| 1 | for Part 5. | Write that numb | er here> | \$ 0.00 |
| | | | | |
| 100 | art 6: | Describe Any Farr | n- and Commercial Fishing-Related Property You Own or Have an Interest In. | |
| | | | | |
| | ı | f you own or hav | ve an interest in farmland, list it in Part 1. | |
| | | - | re an interest in farmland, list it in Part 1. gal or equitable interest in any farm- or commercial fishing-related property? | |
| | | - | | |
| | No. | n or have any le | | |
| | Do you ow | - | | s 0.00 |
| 46. | No. Yes. | n or have any le | | \$0.00 |
| 46. | Do you ow No. Yes. | n or have any le Describe | gal or equitable interest in any farm- or commercial fishing-related property? | \$0.00 |
| 46. | No. Yes. Farm anim Examples: | n or have any le | gal or equitable interest in any farm- or commercial fishing-related property? | \$0.00 |
| 46. | No. Yes. Farm anim Examples: No. | n or have any le Describe als Livestock, poultry, 1 | gal or equitable interest in any farm- or commercial fishing-related property? | \$0.00 |
| 46. | No. Yes. Farm anim Examples: | n or have any le Describe | gal or equitable interest in any farm- or commercial fishing-related property? | |
| 46. 47. | No. Yes. Farm anim Examples: No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe | gal or equitable interest in any farm- or commercial fishing-related property? | \$0.00 \$0 |
| 46. 47. | No. Yes. Farm anim Examples: No. Yes. | n or have any le Describe als Livestock, poultry, 1 | gal or equitable interest in any farm- or commercial fishing-related property? | |
| 46. 47. | No. Yes. Farm anim Examples: No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe | gal or equitable interest in any farm- or commercial fishing-related property? | |
| 46. 47. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit | n or have any le Describe als Livestock, poultry, 1 Describe | gal or equitable interest in any farm- or commercial fishing-related property? | |
| 46. 47. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or le | gal or equitable interest in any farm- or commercial fishing-related property? | |
| 46. 47. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or h | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish narvested | \$0.00 |
| 46. 47. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or h | gal or equitable interest in any farm- or commercial fishing-related property? | \$0.00 |
| 46. 47. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or h Describe | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish narvested | \$0.00 |
| 46. 47. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or h | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish narvested | \$\$\$\$\$\$ |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and to No. Yes. | Describe als Livestock, poultry, f Describe ther growing or h Describe fishing equipment Describe | gal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade | \$0.00 |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and to No. Yes. | Describe als Livestock, poultry, f Describe ther growing or h Describe fishing equipment Describe | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish narvested | \$\$\$\$\$\$ |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and to No. Yes. | Describe als Livestock, poultry, f Describe ther growing or h Describe fishing equipment Describe | gal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade | \$\$\$\$\$\$ |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and fill No. Yes. | Describe als Livestock, poultry, f Describe ther growing or h Describe fishing equipment Describe | gal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade | \$ <u>0.0</u> 0 |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. | Describe als Livestock, poultry, 1 Describe ther growing or b Describe fishing equipment Describe fishing supplies, | gal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade | \$\$\$\$\$\$ |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. Farm and f No. Yes. | n or have any le Describe als Livestock, poultry, f Describe ther growing or h Describe jishing equipment Describe fishing supplies, Describe | gal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade | \$\$ \$\$ \$0.00 |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. Farm and f No. Yes. | n or have any le Describe als Livestock, poultry, f Describe ther growing or h Describe jishing equipment Describe fishing supplies, Describe | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade chemicals, and feed | \$\$ \$\$ \$0.00 |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. Farm and f No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or h Describe jishing equipment Describe jishing supplies, Describe and commercial | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade chemicals, and feed | \$\$ \$\$ \$0.00 |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. Farm and f No. Yes. | n or have any le Describe als Livestock, poultry, f Describe ther growing or h Describe jishing equipment Describe fishing supplies, Describe | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade chemicals, and feed | \$\$ \$0.00 \$0 |
| 46. 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. Farm and f No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or h Describe jishing equipment Describe jishing supplies, Describe and commercial | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade chemicals, and feed | \$\$ \$\$ \$0.00 |
| 46. 47. 48. 49. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and t No. Yes. Farm and t No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or h Describe jishing equipment Describe jishing supplies, Describe and commercial | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish | \$\$ \$0.00 \$0 |
| 46. 47. 48. 49. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and t No. Yes. Farm and t No. Yes. | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or h Describe jishing equipment Describe jishing supplies, Describe and commercial | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish narvested nt, implements, machinery, fixtures, and tools of trade chemicals, and feed | \$\$ \$0.00 \$0 \$\$ |
| 46. 47. 48. 49. 50. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. Farm and f No. Yes. Any farm- Yes. Add the do | n or have any le Describe als Livestock, poultry, 1 Describe ther growing or le Describe jishing equipment Describe pescribe and commercial Describe | gal or equitable interest in any farm- or commercial fishing-related property? arm-raised fish | \$\$ \$0.00 \$0 |

Case 17-80336 Kelli

Doc 1 Filed 02/21/17

Entered 02/21/17 11:25:32 Page 15 of age Number (if known)

Desc Main

First Name

Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Yes. Describe..... 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here --> List the Totals of Each Part of this Form Part 8: \$ 0.00 55. Part 1: Total real estate, line 2 \$ 1,425.00 56. Part 2: Total vehicles, line 5 \$ 500.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 \$627.00 59. Part 5: Total business-related property, line 45 \$ 0.00 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 \$ 0.00 \$ 2,552.00 62. Total personal property. Add lines 56 through 61. \$ 2,552.00 63. Total of all property on Schedule A/B. Add line 55 + line 62\$2,552.00

Record # 737472 Official Form 106A/B Page 6 of 6 Schedule A/B: Property

| Fill in this in | nformation to iden | tify your case: | |
|---------------------|---------------------|---------------------------------------|----------------------------|
| Debtor 1 | Kelli | Lynn | Roccaforte |
| | First Name | Middle Name | Last Name |
| Debtor 2 | - | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | <u>ILLINOIS</u> (State) |
| Case Number | r | | |
| (If known) | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | fy the Property You Claim as Exemp | | | |
|----------------------------|------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------|--------------------------------------|
| | emptions are you claiming? Chec | | • | |
| You are clair | ming state and federal nonbankrupt | cy exemptions . 11 U.S.C. | § 522(b)(3) | |
| You are clain | ming federal exemptions. 11 U.S.C. | § 522(b)(2) | | |
| For any propert | y you list on <i>Schedule A/B</i> that yo | ou claim as exempt, fill in t | the information below. | |
| • | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | 2000 Buick LeSabre with over 170,000 miles | \$ <u>1,425</u> | \$ 2,400 | 735 ILCS 5/12-1001(c) - \$2,400.00 |
| Line from Schedule A/B: | 03 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Furniture, linens, small appliances, table & chairs, bedroom set | \$_100 | | 735 ILCS 5/12-1001(b) - \$100.00 |
| ine from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Flat screen TV, computer, printer, music collection, cell phone | \$ <u>100</u> | \$ | 735 ILCS 5/12-1001(b) - \$100.00 |
| ine from Schedule A/B: | 07 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief lescription: | Everyday clothes, shoes, accessories | \$ <u>100</u> | \$ | 735 ILCS 5/12-1001(a),(e) - \$100.00 |
| Line from Schedule A/B: | <u>11</u> | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |
| ficial Form 106C | Record # 737472 | Schedule C: T | he Property You Claim as Exempt | Page 1 of |

Page 17 of 57 Case Number (if known) Document Debtor 1 Kelli Lynn Last Name Middle Name

| Brief Costume jewelry, earrings, watch description: Since Incomplete Incom | I(a) - \$100.00 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| description: Line from Schedule A/B: 12 Brief books, CDs, DVDs & Family description: Photos 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit Brief Other financial account, Greendot description: Discription: 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001 | I(a) - \$100.00 |
| Schedule A/B: 12 any applicable statutory limit Brief books, CDs, DVDs & Family description: Photos \$ 100 \$ \$ 100% of fair market value, up to any applicable statutory limit Brief Other financial account, Greendot description: pre-paid debit account, 2.00 \$ 2 \$ \$ 100% of fair market value, up to | |
| description: Photos \$ 100 \$ 100% of fair market value, up to any applicable statutory limit Brief Other financial account, Greendot description: Description: Other financial account, 2.00 Description: Description: 100% of fair market value, up to 100% of fair market value, up to | |
| Schedule A/B: 14 any applicable statutory limit Brief Other financial account, Greendot description: pre-paid debit account, 2.00 \$ 2 \$ 100% of fair market value, up to | I(b) - \$2.00 |
| description: pre-paid debit account, 2.00 \$ 2 \$ | l(b) - \$2.00 |
| | |
| | |
| Brief Pension plan, IMRF , 0.00 \$ Unknown \$ \$ | 5 - \$0.00 |
| Line from Schedule A/B: 21 | |
| Brief Debtor has a potential claim description: against an unknown mesh \$ Unknown \$ 18,698 735 ILCS 5/12-1001 | |
| manufacturer, debtor may also be a member of a class action against Line from Schedule A/B: 100% of fair market value, up to any applicable statutory limit | |
| (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment .) ■ No. Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? □ No □ Yes. | |

| F10.1 | Caso 17 | | | 17 Entered 02 | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|----------------------------------------------|----------------------------------|
| Fill in this | s information to ider | itity your case: | | 8 of ! | o <i>(</i> | | |
| Debtor 1 | Kelli | Lynn | Roccafor | te | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing | ng) First Name | Middle Name | Last Name | | | | |
| United Sta | ates Bankruptcy Court fo | or the : <u>NORTHERN</u> | District of <u>ILLINOIS</u> | | | | |
| Case Num | nber | | (State) | | | Check if th | is is an |
| (If known) | | | | | | amended f | filing |
| Official | Form 106D | | | | | | |
| | | | Claims Secured I | | | | 1 |
| | | | Court with your other scriedalt | es. You have nothing else | e to report on this form. | | |
| Yes | . Fill in all of the infor | mation below. | | es. You have nothing else | e to report on this form. | | |
| Part 1: | List All Secured Cl | mation below. | | | e to report on this form. Column A | Column A | Column |
| Part 1: 2. List all for each | List All Secured Cl secured claims. If a h claim. If more than | mation below. laims creditor has more that one creditor has a pa | an one secured claim, list the created alorder according to the credite | creditor separately ditors in Part 2. | | walle of collateral that supports this | Column of Unsecur portion If any |
| Part 1: 2. List all for eac As muc | List All Secured Cl secured claims. If a h claim. If more than | laims creditor has more that one creditor has a page claims in alphabetical | in one secured claim, list the cr articular claim, list the other cre | ereditor separately editors in Part 2. ors name. | Column A Amount of clai Do not deduct th | walle of collateral that supports this | Unsecur portion |
| Part 1: 2. List all for eac As much 2.1 Citiz Credit | List All Secured Cl secured claims. If a h claim. If more than th as possible, list the eens Finance of Illinoi or's Name | laims creditor has more that one creditor has a page claims in alphabetical | n one secured claim, list the control of the control of the control of the credite all order according to the credite | ereditor separately editors in Part 2. ors name. | Column A Amount of clai Do not deduct th value of collatera | Value of collateral that supports this claim | Unsecur portion If any |
| 2. List all for each As much 2.1 Citiz Credit 60 T | List All Secured Cl secured claims. If a h claim. If more than th as possible, list the tens Finance of Illinoi or's Name terra Cotta Ave | laims creditor has more that one creditor has a page claims in alphabetical | an one secured claim, list the control of the creation of the credite of the cred | ereditor separately editors in Part 2. ors name. | Column A Amount of clai Do not deduct th value of collatera | Value of collateral that supports this claim | Unsecur portion If any |
| Part 1: 2. List all for eac As much 2.1 Citiz Credit | List All Secured Cl secured claims. If a h claim. If more than th as possible, list the tens Finance of Illinoi or's Name terra Cotta Ave | laims creditor has more that one creditor has a page claims in alphabetical | an one secured claim, list the contribution of the creation of | ereditor separately editors in Part 2. ors name. secures the claim: | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |
| 2. List all for each As much 2.1 Citiz Credit 60 T | List All Secured Cl secured claims. If a h claim. If more than th as possible, list the tens Finance of Illinoi or's Name terra Cotta Ave | laims creditor has more that one creditor has a page claims in alphabetical | an one secured claim, list the curticular claim, list the other creal order according to the credite Describe the property that a 2000 Buick LeSabre with curticular claim. | ereditor separately editors in Part 2. ors name. secures the claim: | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |
| 2. List all for eac As muc 2.1 Citiz Credit 60 T Numb | List All Secured Cl secured claims. If a h claim. If more than th as possible, list the tens Finance of Illinoi or's Name terra Cotta Ave | laims creditor has more that one creditor has a page claims in alphabetical | an one secured claim, list the contribution of the creation of | ereditor separately editors in Part 2. ors name. secures the claim: | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |
| 2. List all for eac As muc 2.1 Citiz Credit 60 T Numb | List All Secured Claims. If a h claim. If more than the as possible, list the tens Finance of Illinoi or's Name terra Cotta Ave | mation below. laims creditor has more that one creditor has a pate claims in alphabeticatis | an one secured claim, list the contribution of the credity of the | ereditor separately editors in Part 2. ors name. secures the claim: | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |
| 2. List all for eac As muce 2.1 Citiz Credit 60 T Numb | List All Secured Claims. If a h claim. If more than the as possible, list the tens Finance of Illinoi or's Name terra Cotta Ave | laims creditor has more that one creditor has a page claims in alphabeticatis IL 60014 State Zip Code | an one secured claim, list the crafticular claim, list the other creal order according to the creditor. Describe the property that so the community of the property that so the | ereditor separately editors in Part 2. ors name. secures the claim: over 170,000 miles claim is: Check all that appli | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |
| 2. List all for eac As muc 2.1 Citiz Credit 60 T Numb Crys City Who on | List All Secured Claims. If a h claim. If more than the as possible, list the tens Finance of Illinoi or's Name erra Cotta Ave terra Cotta Ave terra Cotta Ave | laims creditor has more that one creditor has a page claims in alphabeticatis IL 60014 State Zip Code | an one secured claim, list the contricular claim, list the other creal order according to the creditor. Describe the property that so 2000 Buick LeSabre with contribution and the date you file, the contribution and continuent Unliquidated Disputed Nature of Lien. Check all the | ereditor separately editors in Part 2. ors name. secures the claim: over 170,000 miles claim is: Check all that appli | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |
| 2. List all for each As much 2.1 Citiz Credit 60 T Numb City Who or Deb | List All Secured Cl secured claims. If a h claim. If more than th as possible, list the tens Finance of Illinoi or's Name terra Cotta Ave | laims I creditor has more that one creditor has a page claims in alphabeticatis IL 60014 State Zip Code | an one secured claim, list the contricular claim, list the other creal order according to the creditor. Describe the property that so 2000 Buick LeSabre with contribution and the date you file, the contribution and continuent Unliquidated Disputed Nature of Lien. Check all the | ereditor separately editors in Part 2. ors name. secures the claim: over 170,000 miles claim is: Check all that appliat apply. | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |
| 2.1 Citiz Credit 60 T Numb Crys City Who or | List All Secured Cl secured claims. If a h claim. If more than th as possible, list the tens Finance of Illinoi or's Name erra Cotta Ave ter Street Street wes the debt? Check of tor 1 only tor 2 only tor 1 and Debtor 2 only | laims I creditor has more that one creditor has a page claims in alphabeticatis IL 60014 State Zip Code | an one secured claim, list the carticular claim, list the other creal order according to the credite Describe the property that so 2000 Buick LeSabre with co As of the date you file, the co Contingent Unliquidated Disputed Nature of Lien. Check all that | ereditor separately editors in Part 2. ors name. secures the claim: over 170,000 miles claim is: Check all that appliant apply. such as mortgage or secured | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |
| 2.1 Citiz Credit 60 T Numb Crys City Who or | List All Secured Cl secured claims. If a h claim. If more than th as possible, list the tens Finance of Illinoi or's Name terra Cotta Ave | laims I creditor has more that one creditor has a page claims in alphabeticatis IL 60014 State Zip Code | an one secured claim, list the conticular claim, list the other creat order according to the creditor. Describe the property that so the contingent of Lien. Check all that a car loan of the contingent of Lien. Check all that the contingent of Lien. Check all that of Lien. | ereditor separately editors in Part 2. ors name. secures the claim: over 170,000 miles claim is: Check all that appliate apply. such as mortgage or secured lien, mechanic's lien) uit | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |
| 2. List all for each As much as much as much as much as much as a second as a | List All Secured Cl secured claims. If a h claim. If more than th as possible, list the tens Finance of Illinoi or's Name erra Cotta Ave ter Street Street wes the debt? Check of tor 1 only tor 2 only tor 1 and Debtor 2 only | It 60014 State Zip Code | an one secured claim, list the carticular claim, list the other creal order according to the credite. Describe the property that a 2000 Buick LeSabre with compared with a 2000 Buick LeSabre with a 20 | ereditor separately editors in Part 2. ors name. secures the claim: over 170,000 miles claim is: Check all that appliate apply. such as mortgage or secured lien, mechanic's lien) uit | Column A Amount of clai Do not deduct th value of collaters \$ 3,400.00 | Value of collateral that supports this claim | Unsecur portion If any |

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|---------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------|------------------------------------------------------------------------|---------------------------------|-----------------------|
| Fill | in this in | nformation to identify you | r case: | | | 9 of 57 | 11.20.02 | Desc Main | |
| De | btor 1 | Kelli | Lynn | Roccaforte | | | | | |
| | | First Name | Middle Name | Last Name | | | | | |
| De | btor 2 | - | | | | | | | |
| (Spi | ouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| Un | ited States | Bankruptcy Court for the :t | NORTHERN_ Dis | | | | | | |
| Ca | se Numbe | ır | | (State) | | | | Check if | f this is an |
| (If | known) | | | | | J | | amende | ed filing |
| <u>Offi</u> | <u>cial F</u> | orm 106E/F | | | | | | | |
| Sch | edule | E/F: Creditors V | Nho Have | Unsecured Claims | | | | | 12/15 |
| ist th I/B: F redite eede op of | e other p Property (ors with p d, copy t any addi | party to any executory con (Official Form 106A/B) and partially secured claims th | tracts or unexp on Schedule G nat are listed in t, number the en ame and case n | , | claim. Al xpired Lea e Claims : | so list executory con uses (Official Form 10 Secured by Property | ntracts on <i>Schedul</i> 06G). Do not includ . If more space is | e | |
| 1. D | o any cre | editors have priority unsec | cured claims ag | ainst you? | | | | | |
| | No. G | o to Part 2. | | | | | | | |
| Ē | Yes. | | | | | | | | |
| e: n: u: | ach claim onpriority nsecured | n listed, identify what type of amounts. As much as post claims, fill out the Continua | f claim it is. If a d sible, list the clai ation Page of Pa | or has more than one priority unse claim has both priority and nonprior ims in alphabetical order according art 1. If more than one creditor hold tructions for this form in the instructions. | ority amoung to the cr | nts, list that claim her editor's name. If you ular claim, list the oth | e and show both pr | riority and o priority 3. | Nonpriority |
| | | | | | | | i Otal Clailli | Priority amount | Nonpriority amount |
| Pa | rt 2: | List All of Your NONPRIORI | TY Unsecured C | laims | | | | | |
| 3. D | o any cre | editors have nonpriority ur | nsecured claims | s against you? | | | | | |
| | No. Yo Yes. | ou have nothing to report in | this part. Subm | nit this form to the court with your | other sche | edules. | | | |
| n in | onpriority cluded in | unsecured claim, list the ci | reditor separatel reditor holds a pa | alphabetical order of the creditor by for each claim. For each claim li articular claim, list the other credit | isted, iden | tify what type of claim | it is. Do not list cla | ims already | Total claim |
| 4.1 | ATG C | redit | | Last 4 digits of account number _ | 7122 | | | | \$_7.00 |
| | | V Cortland St Ste 2 | | When was the debt incurred? | 2014 | -2014 | | | |
| | Chicag | | 60622 | As of the date you file, the claim is Contingent Unliquidated | s: Check a | ll that apply. | | | |
| , | City Who owe: | s the debt? Check one. | Zip Code | Disputed | | | | | |
| | Debtor | • | | | | | | | |
| | Debtor | • | | Type of NONPRIORITY unsecured Student loans | d claim: | | | | |
| | = | 1 and Debtor 2 only tone of the debtors and anothe | er | Obligations arising out of a separa | ation agreer | nent or divorce | | | |
| | = | if this claim relates to a | - | that you did not report as priority of | _ | | | | |
| | comm | unity debt | | Debts to pension or profit-sharing | plans, and | other similar debts | | | |
| | No | im subject to offest? | | Other. Specify Medical Debt | | | | | |
| | Yes | | | outer. opening | | | | | |

Doc 1 Filed 02/21/17 Entered 02/21/17 11:25:32 Desc Main Case 17-80336 Page 20 of 57
Case Number (if known) **Document** Kelli Lynn Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Capital ONE BANK USA N **\$** 426.00 Last 4 digits of account number ____ NULL

| Creditor's Name | 2014 2040 | |
|----------------------------------------------------|-------------------------------------------------------------------|------------------|
| 15000 Capital One Dr | When was the debt incurred? 2014-2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | | |
| Richmond VA 23238 | ☐ Contingent | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| ╡ | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| s the claim subject to offest? | | |
| No | Other. Specify Credit Card or Credit Use | |
| Yes | | |
| Comcast Cable | Last 4 digits of account number | <u>\$ 286.00</u> |
| Creditor's Name | | |
| 1701 John F. Kennedy Blvd | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file the claim is. Check all that apply | |
| | As of the date you file, the claim is: Check all that apply. | |
| Philadelphia PA 19103 | Contingent | |
| City State Zip Code | Unliquidated | |
| Vho owes the debt? Check one. | Disputed | |
| Debtor 1 only | _ | |
| | Type of NONDBIORITY unpopulated plains | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| s the claim subject to offest? | | |
| No | Other. Specify Cable Bill | |
| Yes | | |
| Commonwealth Edison | Last 4 digits of account number | \$ <u>300.00</u> |
| Creditor's Name | | |
| 3 Lincoln Center 4th Floor | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file the claim in Charlet Hate | |
| | As of the date you file, the claim is: Check all that apply. | |
| Oakbrook Terrace IL 60181 | Contingent | |
| | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| = | – | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: □ | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| s the claim subject to offest? | _ _ · · · · · · · · · · · · · · · · · · | |
| No | Other. Specify Utility Bills/Cellular Service | |
| Yes | Guior, Specify | |
| | | |

Doc 1 Filed 02/21/17 Entered 02/21/17 11:25:32 Desc Main Case 17-80336 Page 21 of 57
Case Number (if known) **Document** Kelli Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Crazy Joes Furniture **\$** 600.00 Last 4 digits of account number _

| Creditor's Name | Miles was the debt in summed 2 | |
|---------------------------------------------------|-------------------------------------------------------------------|--------------------|
| 4435 E State St | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Rockford IL 61108 | | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| = | Obligations arising out of a separation agreement or divorce | |
| At least one of the debtors and another | _ , , , , | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls the claim subject to offest? | | |
| No | Other. Specify | |
| Yes | | |
| First Premier BANK | Last 4 digits of account number NULL | <u>\$ 978.00</u> |
| Creditor's Name | 2010 2017 | |
| 601 S Minnesota Ave | When was the debt incurred? 2013-2017 | |
| Number Street | | |
| | As of the date you file the claim is. Check all that apply | |
| | As of the date you file, the claim is: Check all that apply. | |
| Sioux Falls SD 57104 | Contingent | |
| | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | _ | |
| = | Town of MONDRIORITY and a second of the | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls the claim subject to offest? | | |
| No | Other. Specify Credit Card or Credit Use | |
| Yes | | |
| Mutual Management | Last 4 digits of account number | \$ 2,347.00 |
| Creditor's Name | • · · · · · · · · · · · · · · · · · · · | |
| 7177 Crimson Ridge Dr. #10 | When was the debt incurred? | |
| Number Street | | |
| | | |
| | As of the date you file, the claim is: Check all that apply. | |
| B 16 1 | Contingent | |
| Rockford IL 61107 | Unliquidated | |
| City State Zip Code | Disputed | |
| Who owes the debt? Check one. | | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | that you did not report as priority claims | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | Debies to pension or pront-snaming plane, and other similar debis | |
| No | Credit Card or Credit Llee | |
| | Other. Specify Credit Card or Credit Use | |
| Yes | | |

Record # 737472

Case 17-80336 Doc 1 Filed 02/21/17 Entered 02/21/17 11:25:32 Desc Main Page 22 of 57 Number (if known) **Document** Kelli Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.8 | Mutual Management SERV | Last 4 digits of account number 3403 | \$ <u>70.00</u> |
|----------|----------------------------------------------------|-------------------------------------------------------------------|-------------------|
| | Creditor's Name | 0045 0045 | |
| | 7177 Crimson Ridge Dr St | When was the debt incurred? 2015-2015 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Rockford IL 61107 | Unliquidated | |
| | City State Zip Code | Disputed | |
| <u>v</u> | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| <u> </u> | Debtor 1 and Debtor 2 only | Student loans | |
| [| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| " | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| 1 1 | s the claim subject to offest? | | |
| | No | Other. Specify Medical Debt | |
| | Yes SERV | F400 | . 705 00 |
| 4.9 | Mutual Management SERV | Last 4 digits of account number 5129 | \$ _765.00 |
| | Creditor's Name 7177 Crimson Ridge Dr St | When was the debt incurred? 2014-2014 | |
| | | when was the dept incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | D 16 1 | Contingent | |
| | Rockford IL 61107 | Unliquidated | |
| v | City State Zip Code Who owes the debt? Check one. | Disputed | |
| li | Debtor 1 only | | |
| 1 7 | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| 1 1 | Debtor 1 and Debtor 2 only | Student loans | |
| } | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| ĺ | No | Other, Specify Medical Debt | |
| l î | Yes | Other. Specify Medical Debt | |
| 4.10 | Mutual Management SERV | Last 4 digits of account number 2165 | \$ 936.00 |
| 1 | Creditor's Name | | |
| | 7177 Crimson Ridge Dr St | When was the debt incurred? 2015-2015 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Rockford IL 61107 | Unliquidated | |
| | City State Zip Code | | |
| V | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| " | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ! | s the claim subject to offest? | | |
| | No | Other. Specify Medical Debt | |
| | Yes | | |

Official Form 106E/F

Page 23 of 57 Case Number (if known) **Document** Kelli Lynn Debtor 1

| sting any entries on this page, number them | beginning with 4.4, | followed by 4.5, and so forth. | Total Cla |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------------------------------------------------------------|------------------------------------------------------------------|
| Nicor Gas | Last 4 digits of | account number | \$ <u>300.00</u> |
| Creditor's Name | | | |
| PO Box 549 | When was the d | lebt incurred? | - |
| Number Street | | | |
| | As of the date y | ou file, the claim is: Check all that apply | <i>i</i> . |
| | Contingent | | |
| Aurora IL 60507 | Unliquidated | | |
| City State Zip Code | Disputed | | |
| /ho owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPR | IORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | 3 | |
| At least one of the debtors and another | Obligations a | rising out of a separation agreement or divo | orce |
| Check if this claim relates to a | that you did n | ot report as priority claims | |
| community debt | Debts to pens | sion or profit-sharing plans, and other simila | ar debts |
| the claim subject to offest? | | | |
| No | Other. Specify | y Utility Bills/Cellular Service | |
| Yes | | | 700.00 |
| Security Finance | Last 4 digits of | account number | <u>\$ 700.00</u> |
| Creditor's Name | | | |
| 3618 E. State St. | When was the d | lebt incurred? | - |
| Number Street | | | |
| | As of the date y | ou file, the claim is: Check all that apply | 1. |
| | Contingent | | |
| Rockford IL 61108 | Unliquidated | | |
| City State Zip Code | Disputed | | |
| ho owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPR | IORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | 3 | |
| At least one of the debtors and another | Obligations a | rising out of a separation agreement or divo | orce |
| Check if this claim relates to a | that you did n | ot report as priority claims | |
| community debt | Debts to pens | sion or profit-sharing plans, and other simila | ar debts |
| the claim subject to offest? | _ | | |
| No | Other. Specify | Credit Card or Credit Use | |
| Yes | | | |
| 3. List Others to Be Notified for a Debt Th | at You Already Liste | d | |
| this page only if you have others to be notified mple, if a collection agency is trying to collect fi nen list the collection agency here. Similarly, if y itional creditors here. If you do not have addition | rom you for a debt you | ou owe to someone else, list the origina one creditor for any of the debts that yo | al creditor in Parts 1 or ou listed in Parts 1 or 2, list the |
| nebago County Courthouse | | On which entry in Part 1 or Part 2 | |
| W. State St. | | Line7 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| ber Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| akford | | Look A allow | |
| ekford | IL 61101 tate Zip Code | Last 4 digits of account number _ | _ |
| | late Zip Code | | |
| nes C. Thompson | | On which entry in Part 1 or Part 2 | list the original creditor? |
| N. Court St. | | Line of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| ber Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | |
| ckford | IL 61103 | Last 4 digits of account number _ | |
| S | tate Zip Code | | |

Kelli Lynn Debtor 1

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Add the Amounts for Each Type of Unsecured Claim

| 6. | Total the amounts of certain types of unsecured claims. | This information is for statistical reporting purposes only. 28 U.S.C. § 159. |
|----|---------------------------------------------------------|-------------------------------------------------------------------------------|
| | Add the amounts for each type of unsecured claim. | |

| | | | Total claim |
|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | \$0.00 |
| | 6b. Taxes and Certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | |
| | | | Total claim |
| Total claims from Part 2 | 6f. Student loans | 6f. | Total claim \$0.00 |
| | 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority | | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims6h. Debts to pension or profit-sharing plans, and other | 6g. | \$ |

| | | Caso 17 | 20226 Doc 1 I | Tilad 02/21/17 | Entor | ed 02/21/17 | 11:25:32 | Desc Main | |
|-------|------------------------|----------------------|------------------------------------------------------------------|----------------------------|----------------------------|-------------------------------------------------|----------------------------------------|---------------------------------|-------|
| Fil | ll in this in | formation to iden | | | | 5 of 57 | | | |
| De | ebtor 1 | Kelli | Lynn | Roccaforte | | | | | |
| De | ebtor 2 | First Name | Middle Name | Last Name | | | | | |
| (Sp | oouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| Ur | nited States | Bankruptcy Court for | r the : <u>NORTHERN</u> District of _ | ILLINOIS (State) | | | | | |
| | ase Number f known) | | | | | | | Check if this is amended filing | |
| Off | icial F | orm 106G | | | | | | | |
| Sch | edule | G: Execut | ory Contracts and | Unexpired Lea | ses | | | | 12/15 |
| nforn | nation. If n | nore space is nee | possible. If two married people ded, copy the additional page | fill it out, number the er | h are equal ntries, and | ly responsible for su attach it to this page | upplying correct e. On the top of a | nny | |
| | | · | e and case number (if known). contracts or unexpired leases? | | | | | | |
| | _ | - | submit this form to the court with | | ou have not | thing else to report or | n this form. | | |
| | _ | | nation below even if the contrac | | | | | | |
| | | | | | | | | | |
| | | | or company with whom you ha cell phone). See the instruction | | | | | | |
| | nexpired le | | | | | · | , | | |
| | Person or | company with wh | nom you have the contract or I | ease | | State what the | contract or leas | e is for | |
| 2.1 | | | | | | | | | |
| | Name | | | | - | | | | |
| | Number | Street | | | - | | | | |
| | City | | State Zip | Code | _ | | | | |
| 2.2 | , | | <u> </u> | | | | | | |
| | Name | | | | - | | | | |
| | Number | Street | | | - | | | | |
| | | Olicet | | | _ | | | | |
| | City | | State Zip | Code | | | | | |
| 2.3 | | | | | - | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | | | | | |
| | City | | State Zip | Code | _ | | | | |
| 2.4 | | | | | | | | | |
| 2.7 | Name | | | | - | | | | |
| | Number | Street | | | - | | | | |
| | | Olicet | | | _ | | | | |
| | City | | State Zip | Code | | | | | |
| 2.5 | | | | | _ | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | | | | | |

State Zip Code

City

| Fill in this in | nformation to ide | ntify your case: | |
|---------------------|--------------------|-----------------------------------------|-----------------|
| Debtor 1 | Kelli | Lynn | Roccaforte |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court f | for the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number | r | | (State) |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any Additional Fages, write your name date number (it known). Answer every question. | | | | | | |
|--------------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------------|-------------------------|-------------------------------------------------|--|--|
| 1. D | o you have any codebtors? (If yo | ou are filing a joint case, do not list eit | her spouse as a codebto | or.) | | |
| | No. | | | | | |
| | Yes | | | | | |
| 2. W | ithin the last 8 years, have you l | lived in a community property state | or territory? (Communit | y property states and territories include | | |
| Α | rizona, California, Idaho, Lousiian | na, Nevada, New Mexico, Puerto Rico | , Texas, Washington, an | d Wisconsin.) | | |
| | No. Go to line 3. | | | | | |
| | | spouse, or legal equivalent live with yo | ou at the time? | | | |
| | No Yes. Inwhich community | state or territory did you live? | . Fill in th | e name and current address of that person. | | |
| | _ , | , , | | · | | |
| | Name of your spouse, former spous | se or legal equivalent | | | | |
| | Number Street | | | | | |
| | City | State | Zip Code | | | |
| 3. In | | | • | use is filing with you. List the person | | |
| | | or only if that person is a guarantor | | | | |
| | chedule D (Official Form 106D), chedule E/F, or Schedule G to fil | Schedule E/F (Official Form 106E/F), | or Schedule G (Official | Form 106G). Use Schedule D, | | |
| 3 | chedule E/F, or Schedule G to hi | ii out Colulliii 2. | | | | |
| | Column 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt | | |
| | | | | Check all schedules that apply: | | |
| 3.1 | | | | Schedule D, line | | |
| | Name | | | Schedule E/F, line | | |
| | Number Street | | | Schedule G, line | | |
| | City | State | Zip Code | | | |
| 3.2 | City | State | Zip Code | Cabadula D line | | |
| U | Name | | | Schedule D, line | | |
| | | | | Schedule E/F, line | | |
| | Number Street | | | Schedule G, line | | |
| | City | State | Zip Code | | | |
| 3.3 | | | | Schedule D, line | | |
| | Name | | | Schedule E/F, line | | |
| | Number Street | | | Schedule G, line | | |
| | City | State | Zip Code | _ | | |

Official Form 106H Record # 737472 Schedule H: Your Codebtors Page 1 of 1

| Fill in this ir | nformation to iden | | | 01 01 |
|---------------------|---------------------|------------------------------------|-------------|-------------------|
| Debtor 1 | Kelli | Lynn | Roccaforte | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court fo | r the : <u>NORTHERN DISTRICT O</u> | F ILLINOIS | |
| Case Numbe | ·г | | | Check if this is: |
| (If known) | | | | An amended filing |
| | | | | A supplement sho |
| | | | | |

| Che | ck if this is: |
|-----|---------------------------------------------|
| | An amended filing |
| | A supplement showing post-petition |
| | chapter 13 income as of the following date: |
| | |
| | MM / DD / YYYY |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment | | | | |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|----------------------------|--------------------------------|-----------------------------------|
| 1. | Fill in your employment information | | Debtor 1 | | Debtor 2 or non-filing spouse |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | X Employed Not employed | ı | Employed Not employed |
| | Include part-time, seasonal, or self-employed work. | Occupation | Clerk | | |
| | Occupation may Include student or homemaker, if it applies. | Employers name Employers address | Winnebago Count | | |
| | | | Rockford, IL 6110 | 1 | , |
| | | How long employed there? | Since 2/1/2007 | | |
| Pa | rt 2: Give Details About Month | - | | and the country of the country | and last de very non-files |
| | Estimate monthly income as of to spouse unless you are separated. If you or your non-filing spouse ha lines below. If you need more span | ve more than one employer, comb | oine the information for a | | , Ç |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. | | y and commissions (before all pa calculate what the monthly wage w | • | \$2,441.72 | \$0.00 |
| 3. | Estimate and list monthly overti | me pay. | | \$0.00 | \$0.00 |
| 4. | Calculate gross income. Add line | e 2 + line 3. | | \$2,441.72 | \$0.00 |

Official Form 106I Record # 737472 Schedule I: Your Income Page 1 of 2

Document Kelli Lynn Debtor 1 Case Number (if known) _ First Name Middle Name Last Name

| | | | | For Debtor 1 | For Debtor 2 or non-filing spou | | |
|--------------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------|---------------------------------|------|------------|
| | Сору | line 4 here | 4. | \$2,441.72 | \$0.00 | | |
| 5. Li | | payroll deductions: | _ | | _ | | |
| | | ax, Medicare, and Social Security deductions | 5a. | \$571.35 | | 0.00 | |
| | | landatory contributions for retirement plans | 5b | \$109.00 | | 0.00 | |
| | 5c. V | oluntary contributions for retirement plans | 5c. _ | \$0.00 | \$ | 0.00 | |
| | 5d. F | equired repayments of retirement fund loans | 5d. | \$0.00 | | 0.00 | |
| | | nsurance | 5e. — 5f. | \$112.75 | | 0.00 | |
| | 5f. Domestic support obligations | | | \$0.00 | | 0.00 | |
| | 5g. L | Inion dues | 5g. | \$51.44 | \$ | 0.00 | |
| | 5h. Other deductions. Specify: | | | \$0.00 | | 0.00 | |
| | | payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$844.54 | \$ | 0.00 | |
| 7. Ca | lcula | te total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$1,597.18 | \$0.00 | | |
| 8. Lis | st all o | other income regularly received: | | | | | |
| | 8a. | Net income from rental property and from operating a business, | | | | | |
| | | profession, or farm | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | |
| | | monthly net income. | 8a. | \$0.00 | \$6 | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | \$(| 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a | 8c. | \$ 0.00 | \$ (| 0.00 | |
| | | dependent regularly receive | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | |
| | | settlement, and property settlement. | | | | | |
| | 8d. | Unemployment compensation | 8d | \$0.00 | \$ | 0.00 | |
| | 8e. | Social Security | 8e. | \$0.00 | \$(| 0.00 | |
| | 8f. | Other government assistance that you regularly receive | 8f. | \$0.00 | \$ | 0.00 | |
| | | Include cash assistance and the value (if known) of any non-cash | | | | | |
| | | assistance that you receive, such as food stamps (benefits under the | | | | | |
| | | Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | |
| | • | Specify: | | | _ | | |
| | 8g. | Pension or retirement income | 8g. — | \$0.00 | | 0.00 | |
| | 8h. | Other monthly income. Specify: | 8h. — | \$0.00 | | 0.00 | |
| 9. | Add | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9 | \$0.00 | \$ | 0.00 | |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. | \$1,597.18 + | \$0.00 | = | \$1,597.18 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | <u> </u> | V 1,001110 | 40.00 | | ψ1,007.10 |
| 11. | Incluother Other | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are notify: | our dependent | | | 11. | \$0.00 |
| | | the amount in the last column of line 10 to the amount in line 11. The res | | • | t anning | 10 | ¢1 507 40 |
| | | that amount on the Summary of Schedules and Statistical Summary of Ce | | s and Related Data, if i | t applies | 12. | \$1,597.18 |
| 13. | <u>x</u> 1 | ou expect an increase or decrease within the year after you file this form No. ⁄es. Explain: | (| | | | |

| F | ill in this in | formation to identify you | ur case: | | | | |
|------|--------------------------------|----------------------------|---------------------------|--------------------------------------|--------------------------------------------------------------------|-------------------------------------------|-----------------------|
| | Debtor 1 | Kelli | Lynn | Roccaforte | Check if this is | | |
| _ | | First Name | Middle Name | Last Name | ☐ An amen | _ | |
| | Debtor 2 Spouse, if filing) | First Name | Middle Name | Last Name | | ment snowing pos is of the following | t-petition chapter 13 |
| ι | Jnited States | Bankruptcy Court for the : | NORTHERN DISTRICT | OF ILLINOIS | | | sate. |
| | Case Number | | | | MM / DD | / YYYY | |
| Of | ficial F | orm 106J | | | | te filing for Debtor s a separate hous | 2 because Debtor 2 |
| | | e J: Your Exp | nenses | | maintains | s a separate nous | 12/14 |
| | | | | ple are filing together, both are | e equally responsible for supp | lving correct inform | |
| more | = | = | | | s, write your name and case n | | |
| Pa | rt 1: D | escribe Your Household | | | | | |
| 1. | ls this a joi | nt case? | | | | | |
| | X No. G | Go to line 2. | | | | | |
| | Yes. I | Does Debtor 2 live in a se | eparate household? | | | | |
| | | No. | Silver and a Colored | ole I | | | |
| | | Yes. Debtor 2 must | file a separate Sched | ule J. | | | |
| 2. | Do you h | nave dependents? | X No | | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's | Does dependent live |
| | Do not lis Debtor 2. | st Debtor 1 and | | ut this information for ndent | Deptor 1 of Deptor 2 | age | with you? |
| | Do not st | ate the dependents' | | | | | Yes |
| | names. | · | | | | | X No |
| | | | | | | | Yes |
| | | | | | | | X No |
| | | | | | | | Yes |
| | | | | | | | x No |
| | | | | | | | Yes |
| | | | | | | | x No |
| | | | | | | | Yes |
| 3. | Do your | expenses include | X No | | | | Tes . |
| | expense | s of people other than | H | | | | |
| | yourself | and your dependents? | Yes | | | | |
| Pa | rt 2: | stimate Your Ongoing Mo | nthly Expenses | | | | |
| | - | | | | s a supplement in a Chapter 1 neck the box at the top of the fo | - | |
| - | applicable | - | picy is filed. If this is | a supplemental <i>Schedule</i> 3, ci | leck the box at the top of the h | oriii and iiii iii | |
| | - | - | = | ance if you know the value | | | Wave average |
| of s | uch assista | ance and have included i | it on Schedule I: You | r Income (Official Form 106l.) | | | Your expenses |
| 4. | The rent | al or home ownership ex | xpenses for your resi | dence. Include first mortgage p | ayments and | | |
| | - | for the ground or lot. | | | | 4. | \$625.00 |
| | If not inc | cluded in line 4: | | | | | |
| | 4a. Re | al estate taxes | | | | 4a. | \$0.00 |
| | 4b. Pro | operty, homeowner's, or re | enter's insurance | | | 4b. | \$0.00 |
| | 4c. Ho | me maintenance, repair, a | and upkeep expenses | | | 4c. | \$0.00 |
| | 4d. Ho | meowner's association or | condominium dues | | | 4d. | \$0.00 |
| | | | | | | | |

Schedule J: Your Expenses

Kelli Debtor 1

First Name

Lynn

Document

Last Name

Page 30 of 57

Case Number (if known) ___

Middle Name

Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$150.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$70.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$250.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$20.00 9. Clothing, laundry, and dry cleaning 10. \$10.00 Personal care products and services 10. \$15.00 11. Medical and dental expenses 11. \$112.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$65.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Schedule J: Your Expenses

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| Kelli | Lynn | Roccaforte | Case Number (if known) | | |
|-------------|-------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| First Name | Middle Name | Last Name | | | |
| Other. Spe | ecify: Pet Care (\$30.00), | | <u></u> | 21. | \$30.00 |
| | • • | 1. | | 22. | \$1,347.00 |
| Calculate y | our monthly net income. | | | | |
| 23a. | Copy line 12 (your comibined month | nly income) from Schedule I. | | 23a. | \$1,597.18 |
| 23b. | Copy your monthly expenses from | ine 22 above. | | 23b. - | \$1,347.00 |
| | | | | 23c. | \$250.18 |
| or exampl | e, do you expect to finish paying for | your car loan within the year or do | you expect your | | |
| | First Name Other. Specification Calculate y 23a. 23b. 23c. Do you expected a complete or example mortgage p X No | Pet Care (\$30.00), Your monthly expense: Add lines 4 through 2 The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your comibined monthly expenses from 1 23b. Copy your monthly expenses from The result is your monthly expenses from The result is your monthly net incord 25c. Subtract your monthly expenses from The result is your monthly net incord 25c. For example, do you expect to finish paying for mortgage payment to increase or decrease become of the payment of the | Pet Care (\$30.00), Your monthly expense: Add lines 4 through 21. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your comibined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. | Calculate your monthly expenses. Calculate your monthly net income. Copy line 12 (your comibined monthly income) from Schedule I. Copy your monthly expenses from line 22 above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. | First Name Middle Name Last Name Other. Specify: Pet Care (\$30.00). Your monthly expense: Add lines 4 through 21. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your comibined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22 above. 23b. Copy your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly net income. |

 Official Form 106J
 Record #
 737472
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this in | formation to ident | tify your case: | |
|---------------------------|----------------------|-----------------------------------|---------------------|
| Debtor 1 | Kelli | Lynn | Roccaforte |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS (State) |
| Case Number (If known) | | | _ |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | | | | | | | | |
|---------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | | |
| No | | | | | | | | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Under penalty of perjury, I declare that I have read the correct. | ne summary and schedules filed with this declaration and that they are true and | | | | | | | |
| | | | | | | | | |
| ✗ /s/ Kelli Lynn Roccaforte | × | | | | | | | |
| Signature of Debtor 1 | Signature of Debtor 2 | | | | | | | |
| Date 02/20/2017 | | | | | | | | |
| MM / DD / YYYY | Date MM / DD / YYYY | | | | | | | |
| | | | | | | | | |

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| | | D(| Juliuciii I au | COOL |
|---------------------------|---------------------|----------------------------------------|-----------------|------|
| Fill in this in | nformation to ider | ntify your case: | | |
| Debtor 1 | Kelli | Lynn | Roccaforte | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of _ | <u>ILLINOIS</u> | |
| | | | (State) | |
| Case Number (If known) | r | | _ | |
| , , | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

| | r (if known). Answer every question. | | op of any additional pages, write your name and c | ase | | | | | |
|--------------------------------------------|------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------|----------------------------|--|--|--|--|--|
| | hat is your current marital status? | Where You Lived Belore | | | | | | | |
| _ | Married | | | | | | | | |
| L | Not married | | | | | | | | |
| | Not married | | | | | | | | |
| 02 D ı | uring the last 3 years, have you lived anywhere | other than where you live no | w? | | | | | | |
| |] No. | | | | | | | | |
| | Yes. List all of the places you lived in the last 3 y | years. Do not include where y | ou live now. | | | | | | |
| | | | | | | | | | |
| | Debtor 1 | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there | | | | | |
| | | | Same as Debtor 1 | Same as Debtor 1 | | | | | |
| | 606 N Horace Ave | _ FROM 02/2015 | | <u></u> | | | | | |
| | Rockford IL 61101-5143 | To 02/2015 | | | | | | | |
| | | _ | | | | | | | |
| | | | | | | | | | |
| | | | Same as Debtor 1 | Down or Balden 4 | | | | | |
| | 5707 Forest Hills Rd | FROM 07/2013 | Game as Debtor 1 | Same as Debtor 1 | | | | | |
| | Rockford IL 61114-5285 | To 08/2014 | | | | | | | |
| | | _ | | | | | | | |
| | | - | | | | | | | |
| | | | community property state or territory? (Commun evada, New Mexico, Puerto Rico, Texas, Washingi | - | | | | | |
| | d Wisconsin.) | amornia, idano, Eodisiana, it | evada, New Mexico, Facilo Nico, Fexas, Washing | , | | | | | |
| _ | No. | | | | | | | | |
| L | Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). | | | | | | | | |
| | | | | | | | | | |
| Part 2: Explain the Sources of Your Income | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

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Debtor 1 Kelli Lynn Roccaforte Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$4,506 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$32,036 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, \$27,388 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Kelli Lynn Roccaforte Case Number (if known) _ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid owe 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment Include creditor's name Identify Legal actions, Repossessions, and Foreclosures Part 4: Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No. Yes. Fill in the details. Nature of the case Status of the case Court or agency Contract Winnebago County, IL Pending Mutual Management Services Co Llc VS On appeal Kelli Roccaforte CASE NUMBER#15SC3065 Concluded

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| Debto | r 1 | Kelli | Lynn | Roccaforte | Case Number (if kno | wn) | | | | |
|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------|--------------------------|---------------------------------------------|--|--|--|
| | | First Name | Middle Name | Last Name | | | | | | |
| 10 | | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. | | | | | | | | |
| | | No. Go to line 11 | | | | | | | | |
| | Yes. Fill in the information below. | | | | | | | | | |
| 11 | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? | | | | | | | | | |
| | _ | No. Go to line 11 | | | | | | | | |
| | | Yes. Fill in the info | ormation below. | | | | | | | |
| | 12 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? | | | | | | | | | |
| | ■ No. □ Yes. | | | | | | | | | |
| Pa | art 5 | List Certain G | ifts and Contributions | | | | | | | |
| 13 | _ | hin 2 years before | you filed for bankruptcy, did | you give any gifts with a total val | ue of more than \$600 per perso | n? | | | | |
| | = | Yes. Fill in the det | ails for each gift. | | | | | | | |
| 14 | | | | ou give any gifts or contributior | s with a total value of more tha | n \$600 to any ch | arity? | | | |
| | | No. | | | | | | | | |
| | | Yes. Fill in the det | ails for each gift. | | | | | | | |
| Pa | art 6 | List Certain L | osses | | | | | | | |
| 15 | | hin 1 year before y | you filed for bankruptcy or sin | ce you filed for bankruptcy, did y | ou lose anything because of th | eft, fire, other dis | easter, or | | | |
| | = | No. Yes. Fill in the det | ails for each gift. | | | | | | | |
| P | art 7 | List Certain P | ayments or Transfers | | | | | | | |
| 16 | cor | nsulted about seek | king bankruptcy or preparing a | ou or anyone else acting on your bankruptcy petition? rs, or credit counseling agencies | | | ou | | | |
| | | No. Yes. Fill in the det | ails | | | | | | | |
| | | | | | | | | | | |
| | | Party Contact Info | • | Description and value of any p | roperty transferred | Date payment or transfer | Amount of payment | | | |
| | | Geraci Law L.L.C | D | | | | Payment/Value: | | | |
| | | 55 E. Monroe Str | reet #3400 | | | | \$4,000.00: \$0.00 paid prior to filing, | | | |
| | | Chicago,IL 6060 | 3 | | | | balance to be paid through the plan. | | | |
| | | | | | | | | | | |
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Last Name

LynnRoccafortePage 37 of 57Case Number (if known)Case Number (if known)

| | Party Contact Info | Description and value of | any property transferred | Date payn or transfe | |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------|------------------------------------------------------|-----------------------------------------|
| | Hananwill Credit Counseling 115 N. Cross St. Robinson, IL 62454 | Credit Counseling Services | | 2017 | \$25.00 |
| | | | | | |
| 17 | Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that No. | rs or to make payments to your cre | | refer any property to any | one who |
| | Yes. Fill in the details. | | | | |
| 18 | Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu include both outright transfers and transfers Do not include gifts and transfers that you have a like the details for each gift. | usiness or financial affairs? s made as security (such as the gra | nting of a security intere | | |
| 19 | Yes. Fill in the details for each gift. Within 10 years before you filed for bankrup | | o a self-settled trust or s | similar device of which | you are a |
| | ■ No. | rotection devices.) | | | |
| | Yes. Fill in the details for each gift. | | | | |
| P | art 8: List Certain Financial Accounts, Instru | uments, Safe Deposit Boxes, and Stor | age Units | | |
| 20 | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated to the same series of the same series | r other financial accounts; certifica | tes of deposit; shares in | - | |
| | No. | | | | |
| | Yes. Fill in the details. | | | | |
| | | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21 | Do you now have, or did you have within 1 y cash, or other valuables? | rear before you filed for bankruptcy | , any safe deposit box o | r other depository for s | securities, |
| | ■ No. Yes. Fill in the details. | | | | |
| | Tee. This is detaile. | Who else had access to it? | Describe the content | nts | Do you still |
| 22 | Have you stored property in a storage unit of | or place other than your home withi | n 1 vear before vou filed | for bankruptcy? | have it? |
| | No. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,,, | | |
| | Yes. Fill in the details. | Who else has or had access to it? | Describe the content | nts | Do you still have it? |
| P | art 9: Identify Property You Hold or Control | for Someone Else | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Debtor 1

First Name

Middle Name

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| Debtor 1 | Kelli | Lynn | Roccaforte | Case Number (if known) | |
|-------------|----------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------|
| | First Name | Middle Name | Last Name | | |
| | o you hold or cor or someone. | ntrol any property that som | neone else owns? Include any property | you borrowed from, are storing for, or ho | ld in trust |
| | No. | | | | |
| | Yes. Fill in the o | details. | | | |
| | | | Where is the property? | Describe the property | Value |
| | Give Betei | ls About Environmental Infor | matian | | |
| Part | 101 | | | | |
| For th | e purpose of Par | t 10, the following definitio | ns apply: | | |
| ha | zardous or toxic | substances, wastes, or ma | or local statute or regulation concerning sterial into the air, land, soil, surface wa the cleanup of these substances, waste | ter, groundwater, or other medium, | |
| | | ation, facility, or property a perate, or utilize it, includi | | , whether you now own, operate, or utilize | } |
| | | l means anything an envirc ous material, pollutant, con | onmental law defines as a hazardous wa taminant, or similar term. | aste, hazardous substance, toxic | |
| Repoi | rt all notices, rele | ases, and proceedings tha | t you know about, regardless of when t | hey occurred. | |
| 24 H | as any governme | ental unit notified you that y | you may be liable or potentially liable u | nder or in violation of an environmental la | w? |
| | No. | | | | |
| [| Yes. Fill in the o | details. | | | |
| | | | Governmental unit | Environmental law, if you know it | Date of notice |
| 25 H | ave you notified | any governmental unit of a | ny release of hazardous material? | | |
| | No. | | | | |
| | Yes. Fill in the | details. | | | |
| | | | Governmental unit | Environmental law, if you know it | Date of notice |
| 26 H | ave you been a p | arty in any judicial or admi | nistrative proceeding under any enviro | nmental law? Include settlements and ord | lers. |
| | No. | | | | |
| [| Yes. Fill in the | details. | | | |
| | | | Court or agency | Nature of the case | Status of the case |
| Part | 111 Give Detail | ls About Your Business or Co | onnections to Any Business | | |
| 27 W | /ithin 4 years befo | ore vou filed for bankruptc | v. did vou own a business or have any | of the following connections to any busin | ess? |
| | | - | a trade, profession, or other activity, eit | | |
| | A member of | of a limited liability compar | ny (LLC) or limited liability partnership | (LLP) | |
| | A partner in | a partnership | | | |
| | An officer, | director, or managing exec | utive of a corporation | | |
| | An owner o | f at least 5% of the voting | or equity securities of a corporation | | |
| | No. None of the | e above applies. Go to Part | 12. | | |
| | Yes. Check all t | that apply above and fill in th | ne details below for each business. | | |
| | - | ore you filed for bankruptc ors, or other parties. | y, did you give a financial statement to | anyone about your business? Include all | financial |
| | No. | | | | |
| [| Yes. Fill in the | details. | | | |
| | Date issued | | | | |
| | | | | | |
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Debtor 1 Kelli Lynn Roccaforte Case Number (if known) _______

| answers are true and correct. I understand that making a f | fairs and any attachments, and I declare under penalty of perjury that the false statement, concealing property, or obtaining money or property by fraud p to \$250,000, or imprisonment for up to 20 years, or both. | | | |
|---------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| ✗ /s/ Kelli Lynn Roccaforte | × | | | |
| Signature of Debtor 1 | Signature of Debtor 2 | | | |
| Date 02/20/2017 MM / DD / YYYY | Date | | | |
| Did you attach additional pages to Your Statement of Fina | ancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | |
| ■ No □ Yes | | | | |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | | |
| No | | | | |
| Yes. Name of person | . Attach the Bankruptcy Petition Preparer's Notice, | | | |
| res. Name of person | Declaration, and Signature (Official Form 119). | | | |
| | 200.a.aon, una orginatare (Ontolari offin 110). | | | |

Sign Below

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

| In | re | | |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-----------------------------|
| Kel | lli Lynn Roccaforte / Debtor | Case No: | |
| | | Chapter: | Chapter 13 |
| | DISCLOSURE OF CO | MPENSATION OF ATTORNEY FOR DEF | BTOR |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(inpensation paid to me within one year before the filing of the debtor(s) in contents. | the petition in bankruptcy, or agreed to be paid | d to me, for services |
| | For legal services, I have agreed to accept | \$4,000.00 | |
| | Prior to the filing of this statement I have received | \$0.00 | |
| | Balance Due | \$4,000.00 | |
| 2. | The source of the compensation paid to me was: | | |
| | Debtor(s) Other: (specify) | | |
| 3. | The source of compensation to be paid to me is: | | |
| | Debtor(s) Other: (specify) | | |
| 4. | I have not agreed to share the above-disclosed compof my law firm. | pensation with any other person unless they ar | re members and associates |
| | I have agreed to share the above-disclosed compens of my law firm. A copy of the agreement, together attached. | | |
| 5. | In return for the above-disclosed fee, I have agreed to recase, including: | nder legal service for all aspects of the bankru | ptcy |
| | a. Analysis of the debtor's financial situation, and ren | dering advice to the debtor in determining wh | ether to file a petition in |
| | bankruptcy; | Account of Color and also this to the second | t 1. |
| | b. Preparation and filing of any petition, schedules, sta | | |
| | c. Representation of the debtor at the meeting of credi | tors and confirmation hearing, and any adjour | ned hearings thereof; |
| 6. | By agreement with the debtor(s), the above-disclosed fee | e does not include the following service: | |
| | | | |
| | | CERTIFICATION | |
| | I certify that the foregoing is a complete payment to | statement of any agreement or arrangement for | or |
| | me for representation of the debtor(s) in this | bankruptcy proceedings. | |
| | Date: 02/20/2017 | /s/ Daniel Fasman | |
| | Date | Signature of Attorney | |
| | | Geraci Law L.L.C. | |

737472 Page 1 of 1 Record #

Name of law firm

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National Headquarters: 55 E. Monr@ 會使網介場相位 Chicago De 646030 f 5866-925-1313 help@geracilaw.com

Date: 1/30/2017

Consultation Attorney: JKN

Record #: 737-472

Attorney - Client Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment

| account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed. |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility. Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee. |
| PLAN: The plan payment is estimated to be \$ |
| My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other: My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly Debts not discharged if they not paid in full: student loans; educational debts; unfilled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some all of the fu |
| I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and I will be required to pay a fee to have it reopened. |
| X (Joint Debtor) Attorney for the Debtor(s) Representing Geraci Law L.L.C. |

UNITED STATES BANKRUFTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- Case 17-80336 Doc 1 Filed 02/21/17 Entered 02/21/17 11:25:32 Desc Mair 3. Personally review with the debto and significant the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



CARA Page 2 of 6

- Case 17-80336 Doc 1 Filed 02/21/17 Entered 02/21/17 11:25:32 Desc Mair 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

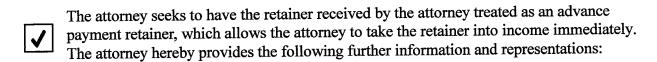


C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



- Case 17-80336 Doc 1 Filed 02/21/17 Entered 02/21/17 11:25:32 Desc Mair
- Any portion of the retainer that is not earned of red for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



Case 17-80336 Doc 1 Filed 02/21/17 Entered 02/21/17 11:25:32 Desc Main F. ALLOWANCE AND PAYMENT OF TATTORNE 4'S OF THE SAND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00

| 3. Before signing this agreement, the attorney has received ,\$ () |
|---------------------------------------------------------------------------------------------------|
| toward the flat fee, leaving a balance due of $\frac{390}{30}$; and $\frac{30}{30}$ for expenses |
| leaving a balance due for the filing fee of \$ |

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: (/39(7

Signed:

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re

| Kelli Lynn Roccaforte / Debtor | Bankruptcy Docket #: |
|--------------------------------|----------------------|
| | |

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 02/20/2017 /s/ Kelli Lynn Roccaforte

Kelli Lynn Roccaforte

X Date & Sign

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^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Kelli Lynn Roccaforte

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 02/20/2017 | /s/ Kelli Lynn Roccaforte | |
|-------------------|---------------------------|---|
| | Kelli Lynn Roccaforte | _ |
| Dated: 02/20/2017 | /s/ Daniel Fasman | |
| Dated. 02/20/2017 | · | _ |
| | Attorney: Daniel Fasman | |

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| abto- d | Kelli | Lynn | Roccaforte | Case Number | er (if known) |
|---------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| ebtor 1 | First Name | Middle Name | Last Name | | |
| | Annual Thora Guerilan | es for Reporting Purns | ses | | |
| | Answer These Question What kind of debts do you have? | 16a. Are your as "incurred No. Go Yes. Go No. Go No. Go No. Go No. G | debts primarily consumed by an individual primarily for the line 16b. So to line 17. debts primarily business a business or investment or the to line 16c. So to line 17. | ır a personal, tamlıy, or nouseri | lebts that you incurred to obtain siness or investment. |
| | Are you filing under | | | | |
| | Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | — ∏Yes. Iam adm □ | not filing under Chapter 7. (o filing under Chapter 7. Do y inistrative expenses are paid No. Yes. | ou estimate that after any exer | distribute to unsecured diedricis. |
| 18. | How many creditors do | 1-49 | = | 1,000-5,000 | 25,001-50,000 |
| | you estimate that you owe? | ☐ 50-99 ☐ 100-199 ☐ 200-999 | _ | □ 5,001-10,000 □ 10,001-25,000 | ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. | How much do you estimate your assets to be worth? | \$0-\$50,0 \$50,001- \$100,000 \$500,000 | \$100,000 I-\$500,000 | ☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion |
| 20. | How much do you estimate your liabilities to be? | \$0-\$50,001 \$100,000 \$500,000 | 000 \$100,000 1-\$500,000 | □ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion |
| Pa | rt 7: Sign Below | | | | |
| For | you | correct. If I have choss of title 11, Unit under Chapte If no attorney this documen I request relied the standard with a bankru | en to file under Chapter 7, I a ted States Code. I understand 7. represents me and I did not t, I have obtained and read the fin accordance with the chaparaking a false statement. | am aware that I may proceed, if not the relief available under each pay or agree to pay someone we ne notice required by 11 U.S.C. pter of title 11, United States Co | ode, specified in this petition. money or property by fraud in connection |
| | | Execut | ed on <u>J J J J J J J J J J J J J J J J J J J</u> | 17 ′ | Executed on |

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| Fill in this in | formation to iden | tify your case: | |
|---------------------|---------------------|-------------------------------------|------------------|
| Debtor 1 | Kelli | Lynn | Roccaforte_ |
| | First Name | Middle Name | Lest Name |
| Debtor 2 | | Middle Name | Last Name |
| (Spouse, if filing) | First Name | | |
| United States | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of | ILLINOIS (State) |
| Case Number | r | | |
| (if known) | | | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Did you pay or agree to pay someone who is NOT an attorned. | ey to help you fill out bankruptcy forms? |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | mary and schedules filed with this declaration and that they are true and |
| sett of the state of the | * |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date MM / DD / YYYY | MM / DD / YYYY |

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| Debtor 1 | Kelli | Lynn | Roccaforte | Case Number (if known) |
|----------|------------|-------------|------------|------------------------|
| Debtor 1 | First Name | Middle Name | Last Name | |

| rt 12: Sign Below | - | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|--|--|
| have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 | | | |
| Date | | | |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | |
| No No | | | |
| ☐ Yes | | | |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | |
| No . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |

Document . DISCLAIMER Debtors have

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above
- time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax. 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filling fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have expess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION S ACCURATE!!!! X Date & Sign

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re

Kelli Lynn Roccaforte / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FORESOING IS TRUE AND CORRECT.

Kelli Lynn Roccafort

X Date & Sign

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| - W - W - | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| 6. Calculate the median family income that applies to you. Follow the | se steps: | |
| 16a. Fill in the state in which you live. | <u>IL</u> | |
| 16b. Fill in the number of people in your household. | 1 | 050 400 00 |
| 16c. Fill in the median family income for your state and size of house To find a list of applicable median income amounts, go online us instructions for this form. This list may also be available at the b | ising the link specified in the separate | \$50,133.00 |
| 7. How do the lines compare? | | |
| § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Dis | | U.S.C |
| 17b. Line 15b is more than line 16c. On the top of page 1 of this f § 1325(b)(3). Go to Part 3 and fill out Calculation of Dispo your current monthly income from line 14 above. | form, check box 2, <i>Disposable income is determined under 11 U.S.C.</i> osable Income (Official Form 122C-2). On line 39 of that form, copy | |
| Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325 | 5(a)(4) | |
| 18. Copy your total average monthly income from line 11. | | \$2,458.56 |
| 19. Deduct the marital adjustment if it applies. If you are married, you that calculating the commitment period under 11 U.S.C. § 1325(b) income, copy the amount from line 13d. If the marital adjustment does not apply, fill in 0 on line 19a. | ur spouse is not filing with you, and you contend | \$0.00 |
| Subtract line 19a from line 18. | • | \$2,458.56 |
| 20. Calculate your current monthly income for the year. Follow these | | \$2,458.56 |
| 20a. Copy line 19b | | x 12 |
| Multiply by 12 (the number of months in a year). | | |
| 20b. The result is your current monthly income for the year for thi | is part of the form. | \$29,502.72 |
| 20c. Copy the median family income for your state and size of hou | ousehold from line 16c | \$50,133.00 |
| 21. How do the lines compare? | | |
| Line 20b is less than line 20c. Unless otherwise ordered by the c 3 years. Go to Part 4. | court, on the top of page 1 of this form, check box 3, The commitment period | lis |
| Line 20b is more than or equal to line 20c. Unless otherwise order check box 4, <i>The commitment period is 5 years</i> . Go to Part 4. | ered by the court, on the top of page 1 of this form, | |
| Part 4: Sign Below | | |
| By signing here, I declare under penalty of perjury that the in Kelli Lynn Roccaforte | information on this statement and in any attachments is true and correct. | |
| Date: <u> </u> | | |
| If you checked line 17a, do NOT fill out or file Form 122C-2. | | -have |
| Is you shocked 17h, fill out Form 122C-2 and file it with this | form. On line 39 of that form, copy your current monthly income from line 14 | apove. |

Form B 201A, Notice to Consumer Debtor(s)

In re Kelli Lynn Roccaforte / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: /2017

Kelli Lynn Reccaforte

X Date & Sign

Dated: <u>L 20</u>2017

Attorney: Daniel Fasman